

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
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EFS ID: 16679
Application ID: 10064548
Title of Invention: AN IMPROVED METHOD FOR
DISPLAYING TEMPORAL CHANGES
IN SPATIALLY MATCHED IMAGES
First Named Inventor: John Sabol
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2002-07-25
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Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: GEMS A 0146
Digital Certificate Holder: cn=John A. Artz, ou=Registered Attorneys, ou=Patent and
Trademark Office, ou=Department of Commerce, o=U.S.
Government, c=US
Certificate Message Digest: PP5mXMVz9KMIB4QkgfqEoA==
Total Fees Authorized: \$780.0
Payment Category: DA - Deposit Account
Deposit Account Number: 500476
Deposit Account Name: John A. Artz

TRANSMITTAL FORM

Electronic Version 1.0.3

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Submission Type: Utility Patent
Filing

Attorney Docket
Number:



GEMS A
0146

AN IMPROVED METHOD FOR DISPLAYING TEMPORAL CHANGES IN SPATIALLY MATCHED IMAGES

First Named Inventor: Mr. John M. Sabol

SUBMITTED BY

Name:

Mr. John A Artz

Registration Number:

25824

Electronic Signature Mark: John A.
Artz

Date Signed: 20020725

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I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration
declaration

Declaration1.tif
Declaration2.tif

declaration	Declaration3.tif
declaration	Declaration4.tif
specification	Specification.xml
fee-transmittal	GEMSA0146fee.xml
patent-assignments	GEMSA0146asgn.xml
bibd-transmittal	GEMSA0146apds.xml

Attached Image File(s):

Declaration1.tif
Declaration2.tif
Declaration3.tif
Declaration4.tif

Comments:

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0851-0032

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	GEMS-A 0146 PUS
	First Named Inventor	John M. Sabol
	COMPLETE IF KNOWN	
	Application Number	/ Applied For
	Filing Date	Herewith
	Group Art Unit	
		Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

AN IMPROVED METHOD FOR DISPLAYING TEMPORAL CHANGES IN SPATIALLY MATCHED IMAGES

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement. This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments or the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label		OR <input checked="" type="checkbox"/> Correspondence address below	
Robert P. Renke			
Name			
Artz & Artz, P.C. 28333 Telegraph Rd., Ste. 250			
Address			
City Southfield		State MI	ZIP 48034
Country USA	Telephone (248) 223-9500		Fax (248) 223-9522
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) John M.		Family Name or Surname Sabol	
Inventor's Signature <i>John M. Sabol</i>		Date 07/08/2002	
Residence: City Sussex	State WI	Country USA	Citizenship Canada
Mailing Address N58 W24838 Cardinal Ct.			
City Sussex	State WI	ZIP 53089-5024	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Gopal B.		Family Name or Surname Avinash	
Inventor's Signature <i>Avinash Gopal</i>		Date 7/8/2002	
Residence: City New Berlin	State WI	Country USA	Citizenship India
Mailing Address 4915 S. Radisson Court			
City New Berlin	State WI	ZIP 53151	Country USA
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto			

[Page 2 of 2]

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Vianney Pierre		Battle	
Inventor's Signature		Date <u>7/8/2002</u>	
Residence: City Milwaukee	State WI	Country USA	Citizenship France
Mailing Address 1029 North Jackson Street			
Mailing Address			
City Milwaukee	State WI	ZIP 53202	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kadri Nizar		Jabri	
Inventor's Signature		Date <u>7/8/02</u>	
Residence: City Waukesha	State WI	Country USA	Citizenship Lebanon
Mailing Address 2833 N. University Drive, #201			
Mailing Address			
City Waukesha	State WI	ZIP 53188	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
RENUKA		UPPALURI	
Inventor's Signature		Date <u>7/10/02</u>	
Residence: City PEWANKEE	State WI	Country USA	Citizenship INDIA
Mailing Address W 271 N 2591 Orchard Ln			
Mailing Address			
City Pewaukee	State WI	ZIP 53072	Country USA

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Renuka		Uppaluri	
Inventor's Signature		Date 7/10/02	
Residence: City Pewaukee	State WI	Country USA	Citizenship Indian
Mailing Address W271N5291 Orchard Lane			
Mailing Address			
City Pewaukee	State WI	ZIP 53072	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

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Large Entity

TOTAL FEES AUTHORIZED: \$ 780

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 50-0476
Deposit Account Name: John A. Artz, P.C.



Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

SUBMITTED BY

Authorized Name: John A. Artz
Electronic Signature Mark: John A. Artz
Date Signed: 20020725

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 740

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 20	103	\$ 18	0	\$ 0
Independent Claims: 3	102	\$ 84	0	\$ 0

